

POSITION	INITIALS	ID NO.	DATE
<b>FEES DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>		48	12/3/01
<b>FORMALITY REVIEW</b>	Ted	JC1147	12/06/01
<b>RESPONSE FORMALITY REVIEW</b>	TC	1019	03-04-02

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral).... Canceled A ..... Appeal  
 ÷ ..... Restricted 0 ..... Objected

Claim	Date
1	7/2/9
2	1/10/01
3	1/10/01
4	1/10/01
5	1/10/01
6	N N
7	1/10/01
8	1/10/01
9	1/10/01
10	1/10/01
11	1/10/01
12	1/10/01
13	1/10/01
14	N N
15	1/10/01
16	1/10/01
17	1/10/01
18	1/10/01
19	1/10/01
20	N
21	N
22	N
23	N
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26	N
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39	N
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50	N

Claim	Date
51	1/2/9
52	1/10/01
53	N N
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56	N N
57	N N
58	N N
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Claim	Date
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JC-571  
03/04/02

If more than 150 claims or 10 actions  
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